Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW HAMPSHIRE		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this a amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Derrick First name  C. Middle name  DiMaggio Last name and Suffix (Sr., Jr., II, III)	Heidi First name  L. Middle name  DiMaggio Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Heidi L Geddis
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3116	xxx-xx-0041

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Debtor 1 Deptor 2 Derrick C. DiMaggio Heidi L. DiMaggio

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	6 Union Street Newport, NH 03773	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Sullivan	County
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 2 Heidi L. DiMaggio				_	Case number (if known)
Pai	t 2: Tell the Court About	Your Bankı	uptcy Ca	ase		
7.	The chapter of the Bankruptcy Code you are			brief description of each, see I, go to the top of page 1 and c		by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy briate box.
	choosing to file under	☐ Chapte	er 7			
		☐ Chapte	er 11			
		☐ Chapte	er 12			
		■ Chapte	er 13			
8.	How you will pay the fee	abo orde a pr	ut how your er. If your e-printed	ou may pay. Typically, if you a attorney is submitting your pall address.	re paying the fee	heck with the clerk's office in your local court for more details e yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with
				<b>y the fee in installments.</b> If y ee <i>in Installments</i> (Official Forr		option, sign and attach the Application for Individuals to Pay
		but app	is not rec lies to yo	quired to, waive your fee, and r ur family size and you are una	may do so only in the feature of the	otion only if you are filing for Chapter 7. By law, a judge may, if your income is less than 150% of the official poverty line that see in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
			District		When	Case number
			District		When	Case number
			District		_ When	Case number
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No.	Go to	line 12.		
	residence?	☐ Yes.	Has yo	our landlord obtained an evicti	on judgment aga	ainst you?
				No. Go to line 12.		
				Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	About an Evicti	ion Judgment Against You (Form 101A) and file it as part of

Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 4 of 63 Debtor 1 Derrick C. DiMaggio Debtor 2 Heidi L. DiMaggio Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

15. Tell the court whether you have received a briefing about credit counseling.  The law requires that your ceceive a briefing about credit counseling agency within the 180 days before I filled this bankruptcy petition, and I received a certificate of completion.  Attach a copy of the certificate of the payment plan, if any, that you developed with the agency. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can desines your can demiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.  Lertify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to balan the before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15	Debtor 1 Derrick C. DiMaggion Heidi L. DiMaggion		Case number (if known)
15. Tell the court whether you have received a briefing about credit counseling.  The law requires that your ceceive a briefing about credit counseling agency within the 180 days before I filled this bankruptcy petition, and I received a certificate of completion.  Attach a copy of the certificate of the payment plan, if any, that you developed with the agency. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can desines your can demiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.  Lertify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to balan the before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15	Part 5: Explain Your Efforts	Receive a Briefing About Credit Counseling	
I received a briefing from an approved credit counseling.  The law requires that you receive a briefing about credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can dismiss your case, you will iose whatever filing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.  I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement waiver of the requirement waiver of the requirement waiver of the require		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.  Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and paymant plan, if any.  I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my requests, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement attach a separate sheet explaining what efforts you file for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any, if you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 day	you have received a briefing about credit counseling.	■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a	■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of
You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.  If you great the file of the same that the same	receive a briefing about credit counseling before		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.  I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to a briefing before you filed for bankruptcy.  If the court is adistinct of the acception of the acc	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to	counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have	counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate
Certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.  To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any, if you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15	If you file anyway, the court can dismiss your case, you	petition, you MUST file a copy of the certificate and	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15	you paid, and your creditors can begin	services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver	from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day
required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.
briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15		required you to file this case.  Your case may be dismissed if the court is	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 day		briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.  You must file a certificate from the approved agency, along with a copy of the payment plan you	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
only for cause and is limited to a maximum of 15		may be dismissed.	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
		only for cause and is limited to a maximum of 15 days.	Use not required to receive a briefing about and the
☐ I am not required to receive a briefing about ☐ I am not required to receive a briefing about ☐ Counseling because of:			

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational

decisions about finances. □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Disability.

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

that makes me incapable of realizing or

My physical disability causes me to be

making rational decisions about finances.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 6 of 63

	tor 1 Derrick C. DiMagg tor 2 Heidi L. DiMaggio				Case nu	umber (if known)	
Par	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,			e defined in 11 U.S	S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investme				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	nat are not consum	er debts or bus	siness debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availabl				led and administrative expenses
	administrative expenses are paid that funds will		□ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000			001-50,000
	you estimate that you owe?	50-99		☐ 5001-10,000 ☐ 10,001-25,00	0		001-100,000 e than100,000
		☐ 100-1 ☐ 200-9		10,001-25,00	O	LI WOO	e man100,000
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500	0,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	\$10,000,001			000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,001			,000,000,001 - \$50 billion e than \$50 billion
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500	0,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	\$10,000,001			000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,001		•	0,000,000,001 - \$50 billion re than \$50 billion
Par	7: Sign Below						
For	you	I have ex	camined this petition, and I declare u	under penalty of pe	erjury that the i	information provide	ed is true and correct.
			chosen to file under Chapter 7, I am tates Code. I understand the relief a				
			rney represents me and I did not pa tt, I have obtained and read the noti				to help me fill out this
		I request	relief in accordance with the chapte	er of title 11, United	d States Code,	, specified in this p	petition.
			and making a false statement, conc cy case can result in fines up to \$25 I				
		/s/ Derr	ick C. DiMaggio		/s/ Heidi L. [		
			C. DiMaggio e of Debtor 1		Heidi L. DiM Signature of D		
		Executed	Movember 29, 2018  MM / DD / YYYY		Executed on	November 29,	

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2	Cas	se number (if known)
under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h	tes Code, and have eave delivered to the	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
/s/ Alice C. Ranson	Date	November 29, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Alice C. Ranson Printed name Elliott, Jasper, Auten & Shklar, LLP Firm name 35 Main Street, Suite 4 Newport, NH 03773-1525		
۰	under Chapter 7, 11, 12, or 13 of title 11, United Stat for which the person is eligible. I also certify that I hand, in a case in which § 707(b)(4)(D) applies, certify schedules filed with the petition is incorrect.  /s/ Alice C. Ranson Signature of Attorney for Debtor  Alice C. Ranson  Printed name  Elliott, Jasper, Auten & Shklar, LLP  Firm name  35 Main Street, Suite 4	I, the attorney for the debtor(s) named in this petition, declare that I have under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have of for which the person is eligible. I also certify that I have delivered to the and, in a case in which § 707(b)(4)(D) applies, certify that I have no know schedules filed with the petition is incorrect.  /s/ Alice C. Ranson  Signature of Attorney for Debtor  Alice C. Ranson  Printed name  Elliott, Jasper, Auten & Shklar, LLP  Firm name  35 Main Street, Suite 4

NH Bar number & State

Fill	in this inforn	nation to identify you	r case:			
Deb	tor 1	Derrick C. DiMag	ggio			
		First Name	Middle Name	Last Name		
	tor 2	Heidi L. DiMaggi		Lost Nome		
(Spou	ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bai	nkruptcy Court for the:	DISTRICT OF NEW HAI	MPSHIRE		
Cas	e number					
(if kno						Check if this is an
					a	mended filing
Off	icial Fo	rm 107				
			Δffairs for Indivi	duals Filing for B	Rankruntov	4/16
					equally responsible for sup y additional pages, write you	
		n). Answer every ques			y additional pages, initio yet	ar name and eace
Part	1. Give D	Notails About Your Ma	arital Status and Where Yo	u Lived Refore		
I all	Give D	etalis About Tour Ma	ntai Status and Where To	u Liveu Belole		
1.	What is you	current marital statu	is?			
	Married					
	□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you I	ived in the last 3 years. Do r	not include where you live nov	٧.	
	Dalutan 4 Da		Patra Bahtan t	Dalitan O Bulan A	Librara	Datas Daktas 0
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ddress:	Dates Debtor 2 lived there
					nity property state or territory ico, Texas, Washington and W	
olulo	o ana torritori	oo morado / mzoria, oa	mornia, raario, Louisiaria, re	ovada, rion moxico, r dono ri	ioo, roxao, rraomigion ana r	110001101111.)
	No					
	Yes. Ma	ke sure you fill out Sch	hedule H: Your Codebtors (C	Official Form 106H).		
Dow	2 Evaloi	n the Courses of Vou	v luoomo			
Part	Explai	n the Sources of You	r income			
4.	Did you have	e any income from en	nployment or from operati	ng a business during this y	ear or the two previous cale	ndar years?
				all businesses, including part		
	ir you are filin	ig a joint case and you	nave income that you receiv	ve together, list it only once ui	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
Fror	m January 1	of current year until	■ Wages, commissions,	\$83,001.98	■ Wages, commissions,	\$18,894.60
		d for bankruptcy:	bonuses, tips	, ,	bonuses, tips	,
					_	
			☐ Operating a business		Operating a business	

Official Form 107

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		errick C. DiMaggio eidi L. DiMaggio			Cas	se number (if known)		
			Dobtov 4			Dobton 2		
			Debtor 1 Sources of incor Check all that app	oly. (bef	oss income fore deductions and lusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December 31, 2017 )	■ Wages, comm bonuses, tips	issions,	\$68,386.78	■ Wages, combonuses, tips	ımissions,	\$31,751.86
			Operating a bu	usiness		☐ Operating a	business	
		dar year before that: December 31, 2016		issions,	\$55,731.38	■ Wages, combonuses, tips	ımissions,	\$27,653.56
			☐ Operating a bu	usiness		☐ Operating a	business	
	■ No	source and the gross i	income from each sour	ce separately. Do	o not include income	that you listed in lir	ne 4.	
			Debtor 1			Debtor 2		
			Sources of incomposition Describe below.	eac (bef	h source fore deductions and dusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa 3.		r Debtor 1's or Debto Neither Debtor 1 no		consumer debts	s? ebts. Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the 90 days by No. Go to lir	or a personal, family, or perfore you filed for bankine 7.  by each creditor to who to creditor. Do not included payments to an attoment on 4/01/19 and events to an extension of the control of the cont	kruptcy, did you pom you paid a tota de payments for corney for this ban	pay any creditor a total al of \$6,425* or more domestic support obliq kruptcy case.	in one or more pay gations, such as ch	yments and the	nd alimony. Also, do
	■ Yes.		2 or both have prima before you filed for bank			al of \$600 or more?	?	
		☐ No. Go to lir	ne 7.					
		include	ow each creditor to who payments for domestic r for this bankruptcy cas	support obligation				t creditor. Do not nclude payments to an
	Creditor	's Name and Addres	Dates	of payment	Total amount paid	Amount you still owe	Was this p	payment for
	30 Aller	e Fed. Fam. Credit n Street I, VT 05701		10/10, 11/10 oximate)	\$1,800.00	\$33,202.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Ro ☐ Supplie ☐ Other_	Card

	btor 2 Heidi L. DiMaggio			se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payı	ment for
	St Mary's Bank P.O. Box 720 Manchester, NH 03105	8/31, 9/30, 10/31 (approximate)	\$1,209.00	\$20,250.00	☐ Mortgage ☐ Car ☐ Credit Carc ☐ Loan Repa ☐ Suppliers o ☐ Other	yment
	One Main Financial 450 West Street Keene, NH 03431	11/9/18, 10/26/18, 10/12/18, 9/28/18, 9/14/18, 8/31/18	\$900.00	\$7,143.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repa ☐ Suppliers o	yment
7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general pof which you are an officer, director, person a business you operate as a sole proprietor. alimony.	partners; relatives of any gen in control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a general p ny managing age	partner; corporatior ent, including one for
	<ul><li>No</li><li>Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for th	nis payment
			paid	still owe		. ,
3.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		•		ccount of a deb	
1.	insider? Include payments on debts guaranteed or co  ■ No □ Yes. List all payments to an insider	osigned by an insider.	ments or transfer a	any property on a		t that benefited a
3.	insider? Include payments on debts guaranteed or co		•		ccount of a deb  Reason for th Include credito	it that benefited a
<sub>}.</sub>	insider? Include payments on debts guaranteed or co  ■ No □ Yes. List all payments to an insider	Dates of payment	ments or transfer a	any property on a	Reason for th	it that benefited a
	insider? Include payments on debts guaranteed or co  ■ No □ Yes. List all payments to an insider Insider's Name and Address	Dates of payment ons, and Foreclosures otcy, were you a party in a	Total amount paid	Amount you still owe	Reason for th Include credito ative proceeding	nt that benefited and the state of the state
Pa	insider? Include payments on debts guaranteed or co  No  Yes. List all payments to an insider Insider's Name and Address  Identify Legal Actions, Repossessic  Within 1 year before you filed for bankrup List all such matters, including personal injur	Dates of payment ons, and Foreclosures otcy, were you a party in a	Total amount paid	Amount you still owe	Reason for th Include credito ative proceeding	nis payment or's name
Pa	insider? Include payments on debts guaranteed or compared in No  Yes. List all payments to an insider Insider's Name and Address  Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.  No	Dates of payment ons, and Foreclosures otcy, were you a party in a	Total amount paid	Amount you still owe	Reason for th Include credito ative proceeding	nis payment or's name
Pai	insider? Include payments on debts guaranteed or color local No  ☐ Yes. List all payments to an insider Insider's Name and Address  Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.  ☐ No  ☐ Yes. Fill in the details.  Case title	Dates of payment  Dates of pay	Total amount paid  ny lawsuit, court ac s, divorces, collection	Amount you still owe	Reason for the Include creditor ative proceeding ctions, support of Status of the	nis payment or's name or custody
Pai	Include payments on debts guaranteed or collision of the large state o	Dates of payment  Dates of pay	Total amount paid  ny lawsuit, court ac s, divorces, collection	Amount you still owe	Reason for the Include creditor ative proceeding ctions, support of Status of the	nis payment or's name or custody
Pai	insider? Include payments on debts guaranteed or complete. No  ☐ Yes. List all payments to an insider Insider's Name and Address  Identify Legal Actions, Repossession Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.  ☐ No ☐ Yes. Fill in the details.  Case title Case number  Within 1 year before you filed for bankrup Check all that apply and fill in the details belonger.	Dates of payment  Dates of pay	Total amount paid  ny lawsuit, court ac s, divorces, collection	Amount you still owe	Reason for the Include creditor ative proceeding ctions, support of Status of the	nis payment or's name or custody

Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 11 of 63 Debtor 1 Derrick C. DiMaggio Debtor 2 Heidi L. DiMaggio Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? Nο Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 11/26/2018 \$690.00 Elliott, Jasper, Auten, Shklar & Ranson 35 Main Street Suite 4 Newport, NH 03773 elliottjasper.com

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Debtor 1 Derrick C. DiMaggio
Debtor 2 Heidi L. DiMaggio

Case number (if known)

CC Advising 703 Washington Ave Suite 200 Bay City, Mil 48708 ccadvising.com  17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?    No		Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and val transferred	ue of any prope	erty	Date payment or transfer was made	Amount of payment
promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Person Who Was Paid Address  Transferred  Transferred  Transferred  No Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business of financial affairs? Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not moutled gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer  Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Description and value of the property transferred  Date Transfer was made  Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Description and value of the property transferred  Date Transfer was made  Date T		703 Washington Ave Suite 200 Bay City, MI 48708				11/28/18	\$19.52
Person Who Was Paid Address	17.	promised to help you deal with your creditors on the promised to help you deal with your creditors on the promise of the promi	or to make payments to			er transfer any prope	ty to anyone who
18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Press. Fill in the details.  Person Who Received Transfer Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Press. Fill in the details.  Name of trust  Description and value of the property transferred  Date Transfer was made  Person.  Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Press. Fill in the details.  Name of trust  Description and value of the property transferred  Include checking, savings, money market, or other financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Press. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Press. Fill in the details.  No Press. Fill in the details.  No Press. Fill in the details.  No Press. Fill		☐ Yes. Fill in the details.					
transferred in the ordinary course of your business or financial affairs? Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.    No				ue of any prope	erty	or transfer was	
Person Who Received Transfer Address  Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date Transfer was made		transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already lis  No	ness or financial affairs as security (such as the	s?			
Address							
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date Transfer was made  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP code)  No Yes. Fill in the details.		Address			payments	received or debts	
beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Date Transfer was made  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.		reison's relationship to you					
Name of trust  Description and value of the property transferred  Date Transfer was made  Part 8:  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)		beneficiary? (These are often called asset-protect		property to a se	elf-settled tru	ust or similar device	of which you are a
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument closed, sold, moved, or transferred  Last 4 digits of account number instrument closed, sold, moved, or transferred  Last balance before closing or transferred  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)		Yes. Fill in the details.					
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP  Last 4 digits of account or instrument or closed, sold, moved, or transfer or transferred  Last 4 digits of account or instrument or instrument or transferred  Date account was closed, sold, moved, or transferred  Last balance before closing or transferred  1. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)		Name of trust	Description and val	ue of the prope	erty transferr	ed	
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument closed, sold, moved, or transferred  Last balance before closing or transferred  Last balance before closing or transferred  No □ you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Describe the contents  Do you still have it?	Par	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit B	oxes, and Stor	age Units		
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument closed, sold, moved, or transferred  Last balance before closing or transferred  Last balance before closing or transferred  No □ you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Describe the contents  Do you still have it?	20						h
☐ Yes. Fill in the details.         Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)       Last 4 digits of account or instrument       Date account was closed, sold, moved, or transfer transferred       Last balance before closing or moved, or transfer transferred         21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?       No         ☐ No       ☐ Yes. Fill in the details.         Name of Financial Institution Address (Number, Street, City, State and ZIP Code)       Who else had access to it? Address (Number, Street, City,       Describe the contents       Do you still have it?	20.	sold, moved, or transferred? Include checking, savings, money market, or o	ther financial accounts	s; certificates o			
Address (Number, Street, City, State and ZIP  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)		_					
cash, or other valuables?  ■ No □ Yes. Fill in the details.  Name of Financial Institution		Address (Number, Street, City, State and ZIP ad	•		clo	sed, sold, oved, or	before closing or
☐ Yes. Fill in the details.         Name of Financial Institution       Who else had access to it?       Describe the contents       Do you still have it?         Address (Number, Street, City, State and ZIP Code)	21.		r before you filed for b	ankruptcy, any	safe deposi	t box or other deposi	tory for securities,
Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City,  have it?		_					
			Address (Number, Stre		escribe the	contents	

Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 13 of 63 Debtor 1 Derrick C. DiMaggio Debtor 2 Heidi L. DiMaggio Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Do you still Name of Storage Facility Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Where is the property? Value Owner's Name Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Date of notice Name of site Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

A member of a limited liability company (LLC) or limited liability partnership (LLP)

Official Form 107

Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 14 of 63 Debtor 1 Derrick C. DiMaggio Debtor 2 Heidi L. DiMaggio Case number (if known) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Heidi L. DiMaggio /s/ Derrick C. DiMaggio Derrick C. DiMaggio Heidi L. DiMaggio Signature of Debtor 1 Signature of Debtor 2 Date November 29, 2018 November 29, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1 Debtor 2 Spouse, if filing) United States Ban	Derrick C. DiMaggio First Name			
Spouse, if filing)		Middle Name Last Name		
Spouse, if filing)	Heidi L. DiMaggio	windle Name Last Name		
Jnited States Ban	First Name	Middle Name Last Name		
	hkruptcy Court for the: DISTF	RICT OF NEW HAMPSHIRE		
Case number				☐ Check if this is an amended filing
Official For	m 106A/B			
Schedule	A/B: Property	V		12/15
If ormation. If more nswer every question and the control of the c	space is needed, attach a separion.  Each Residence, Building, Land, ave any legal or equitable interest.  2. the property?  Your Vehicles	ossible. If two married people are filing together, both a ate sheet to this form. On the top of any additional pag or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property?	es, write your name and cas	e number (if known).
	cks, tractors, sport utility ve	·	inexpired Leases.	
Cars, vans, true □ No ■ Yes	cks, tractors, sport utility ve	hicles, motorcycles	Do not deduct secured cl	
Cars, vans, true  No Yes  3.1 Make: J	•	·	Do not deduct secured cl	
Cars, vans, true  No Yes  3.1 Make: J Model: G	cks, tractors, sport utility ve	hicles, motorcycles  Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ims Secured by Property.
Cars, vans, true  No Yes  3.1 Make: J Model: G	eep Grand Cherokee	who has an interest in the property? Check one  Debtor 1 only Debtor 2 only	Do not deduct secured cl	ed claims on Schedule D:
Cars, vans, true No Yes  3.1 Make: Model: Year: 2	eep Grand Cherokee 012 mileage: 87000	who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure Creditors Who Have Clait	ed claims on Schedule D: ims Secured by Property.  Current value of the
Cars, vans, true No Yes  3.1 Make: J Model: G Year: 2 Approximate	eep Grand Cherokee 012 mileage: 87000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clait	ed claims on Schedule D: ims Secured by Property.  Current value of the
Cars, vans, true No Yes  3.1 Make: J Model: G Year: 2 Approximate Other informate	eep Grand Cherokee 012 mileage: 87000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured classes the amount of any secure Creditors Who Have Classes Current value of the entire property?  \$17,000.00	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$17,000.00
Cars, vans, true  No Yes  3.1 Make: J Model: G Year: 2 Approximate Other informate  3.2 Make: C	eep Grand Cherokee 1012 mileage: 87000 ation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$17,000.00  Do not deduct secured of the amount of any secure	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$17,000.00  daims or exemptions. Put ed claims on Schedule D:
Cars, vans, true No Yes  3.1 Make: J Model: G Year: 2 Approximate Other informs  3.2 Make: C Model: S	eep Grand Cherokee 012 mileage: 87000 ation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one	Do not deduct secured classes the amount of any secure Creditors Who Have Clais  Current value of the entire property?  \$17,000.00  Do not deduct secured classes the amount of any secure Creditors Who Have Clais	current value of the portion you own?  \$17,000.00  current value of the portion you own?  \$17,000.00  current value of the portion you own?
Cars, vans, true No Yes  3.1 Make: J Model: G Year: 2 Approximate Other informs  3.2 Make: C Model: S	cks, tractors, sport utility ve	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$17,000.00  Do not deduct secured of the amount of any secure	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$17,000.00  daims or exemptions. Put ed claims on Schedule D:
□ No ■ Yes  3.1 Make: ☐  Model: ☐  Year: 2  Approximate  Other informs   3.2 Make: ☐  Model: ☐  Year: 2	eep Grand Cherokee 1012 Imileage: 87000 ation: Chevrolet Gilverado 2500 1010 Imileage: 137000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured classes the amount of any secure Creditors Who Have Classes Current value of the entire property?  \$17,000.00  Do not deduct secured classes the amount of any secure Creditors Who Have Classes Current value of the	current value of the portion you own?  \$17,000.00  calms or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the

Official Form 106A/B Schedule A/B: Property page 1

	Derrick C. DiMaggio  Heidi L. DiMaggio  Case number (if known)	own)
	the dollar value of the portion you own for all of your entries from Part 2, including any entries for s you have attached for Part 2. Write that number here=	\$42,000.00
Dort 2	Describe Your Personal and Household Items	
	own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
Exam	ehold goods and furnishings  nples: Major appliances, furniture, linens, china, kitchenware  s. Describe	
	General household furnishings	\$2,000.00
	Tools, necessary for work	\$8,000.00
■ No	<ul> <li>nples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu including cell phones, cameras, media players, games</li> <li>s. Describe</li> </ul>	sic concentoris, electronic devices
B. Collect		coin, or baseball card collections;
B. Collector Exam  No  Ye  Property of the collector of t	nples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, other collections, memorabilia, collectibles  s. Describe  nment for sports and hobbies  nples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can musical instruments	
B. Collect Exam  Not □ Ye  P. Equip Exam  Not □ Ye  10. Firea Exam  Not □ Ye	nples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, other collections, memorabilia, collectibles  s. Describe  nment for sports and hobbies nples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can musical instruments  s. Describe  arms mples: Pistols, rifles, shotguns, ammunition, and related equipment	
8. Collect Exam  No Ye 9. Equip Exam  No Ye 10. Firea Exa  No Ye 11. Clott Exa	nples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, other collections, memorabilia, collectibles  s. Describe  ment for sports and hobbies  nples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can musical instruments  s. Describe  arms  mples: Pistols, rifles, shotguns, ammunition, and related equipment  s. Describe  hes  mples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	

#### 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

☐ Yes. Describe.....

#### 13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No

■ Yes. Describe.....

Cat \$0.00

Official Form 106A/B Schedule A/B: Property

page 2

	Case:	18-11582-	-BAH DOC#:	1 Filed: 11/29/	18 Desc: Mair	1 Document	Page 17 of 63
			io		Ca	ase number (if known)	
	■ No			id not already list, incl	luding any health aic	ds you did not list	
15	□ Yes. Give specific information         55. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here						
Pa	rt 4: Describe Y	our Financial Ass	ets				
				in any of the following	g?		portion you own? Do not deduct secured
16.	Examples: Mo ■ No				it box, and on hand wh	nen you file your petitio	on
	Examples: Che ins	ecking, savings,				dit unions, brokerage h	nouses, and other similar
				Institution nar	ne:		
		17.1	. Checking	Bar Harbor	Bank		\$300.00
		17.2	2. Savings	Bar Harbor	Bank		\$50.00
18.	_Examples: Boi		ment accounts with	,	y market accounts		
	Yes		Institution or issue	er name:			
			ZNGA a single	stock			\$3.52
	joint venture ■ No	pecific informatio	n about them		•	•	t in an LLC, partnership, and
20.	Negotiable ins	and corporate b	onds and other ne e personal checks, o	ashiers' checks, promis	otiable instruments ssory notes, and mone	ey orders.	
	■ No □ Yes. Give sp		n about them suer name:				
21.	□ No	erests in IRA, EF	RISA, Keogh, 401(k)	, 403(b), thrift savings a	accounts, or other pen	nsion or profit-sharing	plans
	Yes. List eac		ately. e of account:	Institution nar	me:		

Official Form 106A/B Schedule A/B: Property page 3

John Hancock

401k

\$5,947.86

Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 18 of 63 Debtor 1 Derrick C. DiMaggio Heidi L. DiMaggio Debtor 2 Case number (if known) 401(k) John Hancock \$8,758.31 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information..

#### 31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 19 of 63 Debtor 1 Derrick C. DiMaggio Debtor 2 Heidi L. DiMaggio Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  $\square$  Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$15.059.69 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

☐ Yes. Give specific information.......

\$0.00

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Derrick C. DiMaggio Debtor 1 Heidi L. DiMaggio Debtor 2 Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$42,000.00 Part 3: Total personal and household items, line 15 \$10,500.00 Part 4: Total financial assets, line 36 \$15,059.69 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$67,559.69 Copy personal property total \$67,559.69 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$67,559.69

Official Form 106A/B Schedule A/B: Property page 6

Fill in this informa	ation to identify your	case:			
Debtor 1	Derrick C. DiMag	gio			
	First Name	Middle Name	Last Name		
Debtor 2	Heidi L. DiMaggio	)			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW HA	MPSHIRE		
Case number					
(if known)				_	neck if this is an
				an	nended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

* * * * * *	•	•		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
General household furnishings Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	N.H. Rev. Stat. Ann. § 511:2(III)
			100% of fair market value, up to any applicable statutory limit	,
Tools, necessary for work Line from Schedule A/B: 6.2	\$8,000.00		\$5,000.00	N.H. Rev. Stat. Ann. § 511:2(III)
Line nom <i>Schedule A/D</i> . <b>4.2</b>			100% of fair market value, up to any applicable statutory limit	311.2(m)
Tools, necessary for work Line from Schedule A/B: 6.2	\$8,000.00		\$3,000.00	N.H. Rev. Stat. Ann. § 511:2(XVIII)
			100% of fair market value, up to any applicable statutory limit	····
Everyday clothes Line from Schedule A/B: 11.1	\$500.00		\$500.00	N.H. Rev. Stat. Ann. § 511:2(
Ellie Holli Genedale Add.			100% of fair market value, up to any applicable statutory limit	
Checking: Bar Harbor Bank Line from Schedule A/B: 17.1	\$300.00		\$300.00	N.H. Rev. Stat. Ann. § 511:2(XVIII)
Line from Goriodaie 77D. 1111			100% of fair market value, up to any applicable statutory limit	· · · · · · · · · · · · · · · · · · ·

# 

Debtor Debtor				Case number (if known)	
	ief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	avings: Bar Harbor Bank	\$50.00		\$50.00	N.H. Rev. Stat. Ann. § 511:2(XVIII)
				100% of fair market value, up to any applicable statutory limit	····
	NGA a single stock	\$3.52		\$3.52	N.H. Rev. Stat. Ann. § 511:2(XVIII)
LII	ile IIIIII Schedule A.B. 10.1			100% of fair market value, up to any applicable statutory limit	311.2(XVIII)
	01k: John Hancock	\$5,947.86		\$5,947.86	N.H. Rev. Stat. Ann. §511:2(XIX)
LII	ile IIOIII <i>Schedule AVB</i> . <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	3311.2(\(\)\(\)
	01(k): John Hancock	\$8,758.31		\$8,758.31	N.H. Rev. Stat. Ann. §511:2(XIX)
LII	ile IIIIII Schedule PVB. 21.2			100% of fair market value, up to any applicable statutory limit	3311.2(\(\)\(\)
	re you claiming a homestead exemption tubject to adjustment on 4/01/19 and every No  Yes. Did you acquire the property cover No  Yes	3 years after that for ca	ases fil	•	,

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Fill in their information to ide						
Fill in this information to ide	ntify your	case:				
Debtor 1 Derrick (	C. DiMag					
First Name	D:14	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)  Heidi L.  First Name	DiMaggi	Middle Name	Last Name			
3,						
United States Bankruptcy Cou	rt for the:	DISTRICT OF NEW HAMPSI	HIRE			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
000 1 1 5 4000						
Official Form 106D						
Schedule D: Cred	litors	Who Have Claims	Secure	ed by Property	/	12/15
		two married people are filing toge ut, number the entries, and attach				
1. Do any creditors have claims s	ecured by	your property?				
☐ No. Check this box and	submit th	is form to the court with your other	er schedules. `	You have nothing else to	report on this form.	
Yes. Fill in all of the info	ormation b	elow				
		olow.				
Part 1: List All Secured Cl				. Column A	Column B	Column C
		ore than one secured claim, list the c a particular claim, list the other credito			Value of collateral	Unsecured
		al order according to the creditor's na		Do not deduct the	that supports this	portion
2.1 Freedom Road Finan	ncial	Describe the property that secure	s the claim:	value of collateral. \$2,671.81	claim \$0.00	If any <b>\$2,671.81</b>
Creditor's Name		Snowmobile		ΨΞ,011101	Ψο.σσ	Ψ2,071.01
		As of the date you file, the claim is	<b>21</b> Ob a als all the at			
P.O. Box 4597		apply.	S. Check all that			
Hinsdale, IL 60522		Contingent				
Number, Street, City, State & Zip	Code	Unliquidated				
Who awas the doht? Ohe all are	_	Disputed	_			
Who owes the debt? Check one	<b>∌.</b>	Nature of lien. Check all that apply				
Debtor 1 only		<ul> <li>An agreement you made (such a car loan)</li> </ul>	s mortgage or s	ecured		
Debtor 2 only						
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	anothar	☐ Statutory lien (such as tax lien, m☐ Judgment lien from a lawsuit	iecnanic's lien)			
☐ Check if this claim relates to		☐ Other (including a right to offset)				
community debt	u	Other (including a right to onset)				
Data daht was insured		Look 4 digito of account you				
Date debt was incurred		Last 4 digits of account nu	mber 1889	<u> </u>		
Haritaga Fad Fam C	`uadit					
Heritage Fed. Fam. C	realt	Describe the property that secure	s the claim:	\$33,202.00	\$25,000.00	\$8,202.00
Creditor's Name		2010 Chevrolet Silverado 2			<u> </u>	
		137000 miles				
	l	As of the date you file, the claim is	S: Chack all that			
30 Allen Street		apply.	3. Check all that			
Rutland, VT 05701		Contingent				
Number, Street, City, State & Zip	Code	Unliquidated				
Who owes the debt? Check one	2	☐ Disputed  Nature of lien. Check all that apply	,			
_	·	_				
Debtor 1 only		<ul> <li>An agreement you made (such a car loan)</li> </ul>	s mortgage or s	ecured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, m	nachanio's lies			
At least one of the debtors and	another	☐ Statutory lien (such as tax lien, rr	iconanio s lien)			
☐ Check if this claim relates to		Other (including a right to offset)				
community debt		\$ (sidding a right to onset)				
Date debt was incurred		Last A digita of account	mbor 0400			
Date debt was incurred		Last 4 digits of account nu	mber <u>8400</u>	·		

Official Form 106D

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Debtor 1 Derrick C. DiMaggio		Case number	∋r (if known)		
First Name Middle M	Name Last Name		_		
Debtor 2 Heidi L. DiMaggio					
First Name Middle Middl	Name Last Name				
2.3 St Mary's Bank	Describe the property that secures the	claim:\$20	,250.00	\$17,000.00	\$3,250.00
Creditor's Name	2012 Jeep Grand Cherokee 870	000			
	miles				
P.O. Box 720	As of the date you file, the claim is: Checapply.	ck all that			
Manchester, NH 03105	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	■ An agreement you made (such as mort	tgage or secured			
Debtor 2 only	car loan)	gage or colored			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number	0002	_		
Add the dollar value of your entries in 0	Column A on this page. Write that number	here:	\$56,123.81	7	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.		\$56,123.81	_	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case	. 16-11362-BAH	DUC #	r Filed. II	729/18 DE	SC. IVI	am Document	Page	25 01 03
Fill	in this inform	nation to identify your o	case:						
	tor 1								
Den	tor r	Derrick C. DiMago	Middle Na	ame	Last Name				
Deb	tor 2	Heidi L. DiMaggio							
(Spou	use if, filing)	First Name	Middle Na	ame	Last Name				
Unit	ed States Bar	kruptcy Court for the:	DISTRICT	OF NEW HAMPS	SHIRE				
Cas	e number								
(if kno				_				□ CI	heck if this is an
								ar	mended filing
	icial Form		he Heye	Unacquira	d Claima				40/45
		F: Creditors W accurate as possible. Us							12/15
Scheeleft. Anname	dule D: Credito Attach the Cont and case num	ory Contracts and Unexpires Who Have Claims Sectionation Page to this pageber (if known).	ured by Proper e. If you have r	ty. If more space in information to	is needed, copy	the Part y	ou need, fill it out, num	ber the ent	ries in the boxes on the
Part		of Your PRIORITY Un							
	_ ′	rs have priority unsecured	d claims agains	st you?					
	No. Go to Pa	art 2.							
	Yes.								
Part	2: List Al	of Your NONPRIORIT	Y Unsecured	Claims					
3. I	Do any credito	rs have nonpriority unsec	ured claims ag	ainst you?					
l	□ No. You hav	e nothing to report in this pa	art. Submit this f	orm to the court w	ith your other sch	edules.			
	Yes.								
			-! ! 4bl!		: 4l		ala alaima 16 - 19 - 1		,
t t	unsecured claim	nonpriority unsecured cla n, list the creditor separately or holds a particular claim, li	for each claim.	For each claim list	ted, identify what	type of clai	im it is. Do not list claims	already incl	luded in Part 1. If more
									Total claim
4.1	Bank of	America		Last 4 digits of a	ccount number	6192			\$5,281.00
		Creditor's Name		_uct : u.gc c. u		0.02		-	ψο,201.00
	P.O. Box			When was the de	ebt incurred?	09/19/	/2017		
		ton, DE 19886-5019 reet City State Zlp Code		As of the date yo	u file the claim	is: Chock	all that apply		
		red the debt? Check one.		As of the date yo	ou me, me claim	is. Check	ан шасарріу		
	Debtor			☐ Contingent					
	☐ Debtor	•		☐ Unliquidated					
		1 and Debtor 2 only		☐ Disputed					
		one of the debtors and and	ther	Type of NONPRI	ORITY unsecure	d claim:			
		if this claim is for a comm		☐ Student loans					
	debt			☐ Obligations ari	ising out of a sepa	aration agr	eement or divorce that yo	ou did not	
	Is the clair	n subject to offset?		report as priority of	claims				
	■ No			☐ Debts to pensi	ion or profit-sharir	ng plans, a	nd other similar debts		
	☐ Yes			Other. Specify	Credit card	l purcha	ases		

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	Derrick C. DiMaggio Heidi L. DiMaggio		Case number (if known)	
	Capital One Bank USA N.A.  Nonpriority Creditor's Name	Last 4 digits of account number	2398	\$2,178.00
	P.O. Box 71087 Charlotte, NC 28272-1087	When was the debt incurred?	4/3/2017	
=	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
	Capital One Bank USA N.A. Nonpriority Creditor's Name	Last 4 digits of account number	3611	\$215.69
	P.O. Box 71083 Charlotte, NC 28272-1082	When was the debt incurred?		
-	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separeport as priority claims</li> </ul>	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	on plans, and other similar debts	
		·		
	Yes	Other. Specify Credit card	purchases	
	Capital One Bank USA N.A.	Last 4 digits of account number	1787	\$374.25
	Nonpriority Creditor's Name P.O. Box 71083 Charlotte, NC 28272-1082	When was the debt incurred?		
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	0 0 1	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharir		
	Yes	Other. Specify		

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	□ Derrick C. DiMaggio □ Heidi L. DiMaggio	Case number (if known)					
4.5	Capital One Bank USA N.A.	Last 4 digits of account number	9474	\$733.00			
	Nonpriority Creditor's Name P.O. Box 71083	When was the debt incurred?	4/19/16	<u> </u>			
Ī	Charlotte, NC 28272-1082 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
1	Chase/Cardmember Service Nonpriority Creditor's Name	Last 4 digits of account number	7472	\$2,141.00			
	P.O. Box 1423 Charlotte, NC 28021	When was the debt incurred?	12/2/14				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit card	purchases				
	Chase/Cardmember Service	Last 4 digits of account number	2473	\$928.00			
	Nonpriority Creditor's Name P.O. Box 1423	When was the debt incurred?	12/18/2015				
Ī	Charlotte, NC 28021  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt	0 0 1	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit card	purchases				

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Dartmouth Hitchcock	Last 4 digits of account number	\$2,919.12
Nonpriority Creditor's Name P.O. Box 419114 Boston, MA 02241-9114	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Services	
First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number unknown	\$548.26
P.O. Box 5519 Sioux Falls, SD 57117	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
Gragil Associates	Last 4 digits of account number unknown	\$190.00
Nonpriority Creditor's Name	When we the debt incorred 2 09/09/0940	
29 Winter Street P.O. Box 1010	When was the debt incurred? 08/03/2016	
Pembroke, MA 02359		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

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Heidi L. DiMaggio		
One Main Financial	Last 4 digits of account number	\$7,143.00
Nonpriority Creditor's Name 450 West Street	When was the debt incurred? 11/1/16	
Keene, NH 03431  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Snap-On Credit	Last 4 digits of account number	\$6,689.0
Nonpriority Creditor's Name 950 Technology Way #301	When was the debt incurred? 11/19/99	. ,
Libertyville, IL 60048  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date year me, the stannie. Onesk an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Southwest Credit	Last 4 digits of account number Unknown	\$522.0
Nonpriority Creditor's Name PO Box 650543	When was the debt incurred? 05/23/2017	
Dallas, TX 75265-0543 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

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Debto	or 2 Heidi L. DiMaggio		Case number (if known)	
4.1 4	Synchrony Bank	Last 4 digits of account number	3905	\$3,639.00
	Nonpriority Creditor's Name P.O. Box 960061	When was the debt incurred?	10/22/2017	
	Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.1	Synchrony Bank	Last 4 digits of account number	4119	\$2,540.00
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896	When was the debt incurred?	10/22/17	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
		Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	Student loans	. oldiiii.	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Synchrony Bank/Care Credit	Last 4 digits of account number	1052	\$220.00
	Nonpriority Creditor's Name 140 Wekira Springs Road	When was the debt incurred?	06/23/2014	
	Longwood, FL 32779  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 2 only  Debtor 1 and Debtor 2 only	<u> </u>		
	At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		ration agreement or divorce that you did not	
	<u> </u>	<u></u>		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1	Derrick C. DiMaggio		
Debtor 2	Heidi L. DiMaggio	Case number (if known)	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 36,261.32
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 36,261.32

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Fill in this information to identify your case:									
Debtor 1	Derrick C. DiMag	gio							
	First Name	Middle Name	Last Name						
Debtor 2	Heidi L. DiMaggio	)							
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW HA	MPSHIRE						
Case number _					☐ Check if this is an amended filing				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Olalo	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	- ity		Ciaio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

# 

Fill in this	information to identify your	case:			
Debtor 1	Derrick C. DiMag	gio			
	First Name	Middle Name	Last Name		
Debtor 2	Heidi L. DiMaggio				
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW HA	AMPSHIRE		
Casa numb					
Case numb (if known)	Dei				1 Check if this is an
					amended filing
				_	
Official	l Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
ill it out, ar		boxes on the left. Attac	h the Additional Page to	on. If more space is needed, con this page. On the top of any a	
1. Do y	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. . Did your spouse, former spou	Nevada, New Mexico, P	uerto Rico, Texas, Washi	(? (Community property states a ngton, and Wisconsin.)	and territories include
in line Form 1 out Co	2 again as a codebtor only i	f that person is a guara Form 106E/F), or Sched	ntor or cosigner. Make s	if your spouse is filing with your spouse is filing with your you have listed the credit (6G). Use Schedule D, Schedule Column 2: The creditor to Check all schedules that ap	or on Schedule D (Official e E/F, or Schedule G to fill whom you owe the debt
1,	varie, ivaliber, otreet, oity, otate and zi	1 0000		Check all schedules that ap	ply:
3.1				☐ Schedule D, line	
<u> </u>	Name			Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(	City	State	ZIP Code		
				Подельна в п	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
_					
	Number Street	Ctoto	7ID Ca-4a		
(	City	State	ZIP Code		

Fill in this informa	tion to identify your case:	
Debtor 1	Derrick C. DiMaggio	
Debtor 2 (Spouse, if filing)	Heidi L. DiMaggio	
United States Bar	nkruptcy Court for the: DISTRICT OF NEW HAMPSHIRE	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	orm 106l	13 income as of the following date:  MM / DD/ YYYY

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	<b>11:</b> Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Technician	Title Clerk
	Include part-time, seasonal, or self-employed work.	Employer's name	Springfield Auto Mart Inc.	Newport Chevrolet Buick GMC Inc
	Occupation may include student or homemaker, if it applies.	Employer's address	431 River Street North Springfield, VT 05150	P.O. Box 10 Newport, NH 03773
		How long employed the	nere?	_

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 8,204.52 \$ 3,004.36

3. +\$ 0.00 +\$ 203.14

4. \$ 8,204.52 \$ 3,207.50

For Debtor 1

For Debtor 2 or

Debtor 1 Debtor 2		_	C	ase I	number ( <i>if known</i> )			
			I	For	Debtor 1		Debtor 2 or -filing spouse	
Co	ppy line 4 here	4.	-	\$	8,204.52	\$	3,207.50	
5. <b>Li</b>	st all payroll deductions:							
5a		5a.	. :	\$	1,496.44	\$	442.42	
5b		5b.		\$	0.00	\$_	0.00	
50	·	5c.		\$-	328.18	\$_	128.28	
50		5d.		\$ _	143.33	<u>\$</u> —	83.42	
5e		5e.		\$_	262.08	<u>\$</u> —	463.45	
5f.		5f.		\$_	6.67	<u>\$</u> —	0.00	
50		5g.		\$_	0.00	\$_	0.00	
5h		5h.		\$ 	31.63	*	13.43	
0.	AFLAC	_		\$_	0.00	\$	189.28	
	Dental	_		\$-	2.64	\$_	20.84	
6. <b>A</b> c	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	9	Б	2,270.97	\$	1,341.12	
	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	· —	5,933.55	\$ \$	1,866.38	
		٠.	4	<b>—</b>	3,933.33	Ψ_	1,000.30	
8. <b>Li</b> 8a	st all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. :	\$	0.00	\$	0.00	
8b		8b.	. :	\$ 	0.00	\$	0.00	
8c 8c 8e	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation Social Security	8c. 8d. 8e.	. :	\$ \$ \$	0.00 0.00 0.00	\$ \$	0.00 0.00 0.00	
8f. 8g 8h	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	8f. 8g.		\$ \$	0.00	\$ \$ +	0.00 0.00 0.00	
		_		_		_		
9. <b>A</b>	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$	0.00	
10. <b>C</b> a	alculate monthly income. Add line 7 + line 9.	10.	\$		5,933.55 + \$	1,8	366.38 = \$ 7,	799.93
Ac	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L						
Ind ot Do	ate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, you ner friends or relatives.  In not include any amounts already included in lines 2-10 or amounts that are not specify:	r depe				•	Schedule J. 11. +\$	0.00
W	dd the amount in the last column of line 10 to the amount in line 11. The re- rite that amount on the Summary of Schedules and Statistical Summary of Certa- plies							799.93
13. <b>D</b> o	you expect an increase or decrease within the year after you file this form No.	1?					monthly in	
	Yes. Explain:							

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Derrick C. Di	iMaggio			Chec	k if this is:	
L.			_			_	An amended filing	
	otor 2 ouse, if filing)	Heidi L. DiMa	aggio				A supplement show 13 expenses as of	ving postpetition chapter the following date:
(Spt	ouse, ii iiiiig)						TO EXPONESS AS ST	and removing date.
Unit	ted States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW HAMPSHI	RE	Ī	MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your	Eynar	1606				12/15
Be info nur	as complete a complete	and accurate as lore space is ne n). Answer evel	s possible eded, atta ry questio	. If two married people ich another sheet to th				r supplying correct
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold					
١.	□ No. Go to							
	_		in a sonar	ate household?				
			ш а эсраг	ate nousenoid:				
	■ N □ Y	-	st file Offic	ial Form 106J-2, <i>Expen</i> s	ses for Separate House	hold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		8 mo	Yes
					Daughter		7	■ No
					Daugittei		· ·	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.		enses include		No				
	•	f people other to d your depende	han 🖂	Yes				
_								
exp	imate your ex		our bankr	uptcy filing date unless				pter 13 case to report f the form and fill in the
the		h assistance an		government assistanc cluded it on <i>Schedule I</i>			Your expe	enses
4.		or home owners and any rent for the		ises for your residence or lot.	. Include first mortgage	4. \$		1,100.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
				upkeep expenses		4c. \$		125.00
5		owner's associat			homo oquity loose	4d. \$ 5. \$		0.00
5.	Auditional I	norigage payme	ziilo iur ya	our residence, such as	nome equity loans	J. \$		0.00

Debtor 1		0	h ('f l )	
Debtor 2	Heidi L. DiMaggio	case num	ber (if known)	
6. Uti	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	350.00
6b.	Water, sewer, garbage collection	6b.	\$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	330.00
6d.	Other. Specify: Propane - Hot Water	6d.	\$	30.00
7. <b>Fo</b>	od and housekeeping supplies	7.	\$	1,050.00
8. <b>Ch</b>	Idcare and children's education costs	8.	\$	730.00
9. <b>Cl</b> c	thing, laundry, and dry cleaning	9.	\$	175.00
	sonal care products and services	10.	\$	175.00
11. <b>Me</b>	dical and dental expenses	11.	\$	675.00
12. <b>Tra</b>	nsportation. Include gas, maintenance, bus or train fare.			
Do	not include car payments.	12.	\$	680.00
13. <b>En</b> t	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	180.00
14. Ch	aritable contributions and religious donations	14.	\$	0.00
	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.		•	
	a. Life insurance	15a.	·	0.00
	o. Health insurance	15b.	·	0.00
	. Vehicle insurance	15c.		225.00
	I. Other insurance. Specify:	15d.	\$	0.00
	<b>tes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.	4.0	•	
•	ecify:	16.	\$	0.00
	tallment or lease payments:  . Car payments for Vehicle 1	17a.	¢	402.00
	• •		*	403.00
	Car payments for Vehicle 2	17b.	·	600.00
	c. Other Specify:	17c.	·	0.00
	I. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report a ducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	ner payments you make to support others who do not live with you.	,	\$	519.60
	ecify: Child Support	19.	<u> </u>	313.00
	ner real property expenses not included in lines 4 or 5 of this form or on Sch		our Income	
	Mortgages on other property	20a.		0.00
	o. Real estate taxes	20b.	·	0.00
	. Property, homeowner's, or renter's insurance	20c.		0.00
	I. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	•	0.00
	ner: Specify:	21.	·	0.00
. Ou	er. Opecity.		ΤΨ	0.00
	culate your monthly expenses			
228	a. Add lines 4 through 21.		\$	7,427.60
22b	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	a. Add line 22a and 22b. The result is your monthly expenses.		\$	7,427.60
			· —	1,121100
	culate your monthly net income.		•	
	i. Copy line 12 (your combined monthly income) from Schedule I.	23a.	· ·	7,799.93
23k	c. Copy your monthly expenses from line 22c above.	23b.	-\$	7,427.60
226	:. Subtract your monthly expenses from your monthly income.			
230	The result is your <i>monthly net income</i> .	23c.	\$	372.33
24 <b>D</b> o	you expect an increase or decrease in your expenses within the year after y	ou file this	form?	
	example, do you expect to finish paying for your car loan within the year or do you expect you			e or decrease because of a
	dification to the terms of your mortgage?	-3-3-1	,	
	No.			
	Yes. Explain here:			

Fill in this inforr	nation to identify your case:
Debtor 1	Derrick C. DiMaggio
Debtor 2 (Spouse, if filing)	Heidi L. DiMaggio
United States E	Bankruptcy Court for the: District of New Hampshire
Case number	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.
	Check if this is an amended filing

# Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

## Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		 mn B or 2 or filing spouse
<ol><li>Your gross wages, salary, tips, bonuses, overtime payroll deductions).</li></ol>	e, and co	mmissi	ons (before all	\$	8,204.52	\$ 2,837.40
<ol> <li>Alimony and maintenance payments. Do not include Column B is filled in.</li> </ol>	de payme	nts from	a spouse if	\$	0.00	\$ 0.00
4. All amounts from any source which are regularly of you or your dependents, including child suppo from an unmarried partner, members of your househ and roommates. Do not include payments from a spo you listed on line 3.	o <b>rt.</b> Includ old, your	e regula depende	r contributions nts, parents,	\$	0.00	\$ 0.00
<ol><li>Net income from operating a business, profession, or farm</li></ol>	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$ _	0.00				
Net monthly income from a business, profession, or f	arm \$	0.00	Copy here ->	\$	0.00	\$ 0.00
6. Net income from rental and other real property	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00				
Net monthly income from rental or other real property	. •	0.00	Copy here ->	\$	0.00	\$ 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 non-filing	or	
7.	Interes	st, dividends, and royalties			\$	0.00	\$	0.00	
8.	Unemp	ployment compensation			\$	0.00	\$	0.00	
		enter the amount if you contend that the cial Security Act. Instead, list it here:	amount received w	as a benefit unde	r				
	Fory	you	\$	0.00					
		your spouse		0.00					
	benefit	on or retirement income. Do not include under the Social Security Act.			\$	0.00	\$	0.00	
10.	Do not receive	e from all other sources not listed abounced any benefits received under the ad as a victim of a war crime, a crime agatic terrorism. If necessary, list other sourcelow.	Social Security Act	or payments ternational or					
					\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
		Total amounts from separate pages, if	any.	+	· \$	0.00	\$	0.00	
11.		ate your total average monthly income olumn. Then add the total for Column A to			8,204.52	+ \$ _	2,837.40	= \$	11,041.92
									al average nthly income
Part	2:	Determine How to Measure Your Ded	uctions from Incon	ne					
12. 13.	Copy y	our total average monthly income fro ate the marital adjustment. Check one	m line 11.					\$	11,041.92
	□ Yo	ou are not married. Fill in 0 below.							
	■ Yo	ou are married and your spouse is filing	with you. Fill in 0 bel	ow.					
	□ Yo	ou are married and your spouse is not fili	ng with you.						
	de	Il in the amount of the income listed in lirependents, such as payment of the spou	se's tax liability or th	e spouse's suppo	ort of someor	ne other th	nan you or yo	ur depende	ents.
		elow, specify the basis for excluding this djustments on a separate page.	income and the ame	ount of income de	evoted to eac	ch purpose	e. If necessar	y, list addit	ional
		this adjustment does not apply, enter 0 b	elow.						
		-		\$					
				\$					
		-		+\$					
		Total		\$	0.0	00 Co	opy here=>		0.00
14.	Your	current monthly income. Subtract line	13 from line 12.					\$	11,041.92
15.	Calcu	late your current monthly income for	the year. Follow th	ese steps:					
	15a.	Copy line 14 here=>						\$	11,041.92
		Multiply line 15a by 12 (the number of m	nonths in a year).					_ x 1	2
	15b.	The result is your current monthly incom	ne for the year for th	is part of the form	ı			\$ <b>1</b> :	32,503.04
									I

Derrick C. DiMaggio

Heidi L. DiMaggio

Debtor 1 Debtor 2

## Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 40 of 63

Heidi L. DiMaggio Debtor 2 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. NH 16b. Fill in the number of people in your household. 3 95.634.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. \$ 11,041.92 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 11,041.92 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 11,041.92 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 \$ 132,503.04 20b. The result is your current monthly income for the year for this part of the form 95,634.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment* period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4. The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Derrick C. DiMaggio X /s/ Heidi L. DiMaggio Derrick C. DiMaggio Heidi L. DiMaggio Signature of Debtor 2 Signature of Debtor 1 Date November 29, 2018 Date November 29, 2018 MM / DD / YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Derrick C. DiMaggio

Debtor 1

·	0:::	. 1							
Fill in	this information t	o identify your	case:						
Debto	r 1 Derrick	C. DiMaggio							
Debto	or 2 Heidi L	. DiMaggio							
United	d States Bankruptcy	Court for the:	District of New H	ampshire					
Case (if kno	number wn)					[	☐ Check if th	nis is an amend	ed filing
	ıl Form 122C-2 1pter 13 Ca	Iculation	of Your l	Disposabl	le In	come			04/16
	out this form, you nitment Period (Off			of Chapter 13 Sta	atemer	nt of Your Current	Monthly Inco	ome and Calcula	tion of
space	complete and acci is needed, attach onal pages, write y	a separate shee	et to this form, In	clude the line nu					
Part 1	Calculate Yo	ur Deductions	from Your Incom	пе					
the	e Internal Revenue questions in lines ormation may also	6-15. To find th	he IRS standards	s, go online using					
exp	duct the expense are his enses if they are his 2C-1, and do not de	gher than the sta	andards. Do not in	iclude any operatii	ng expe	enses that you subt	racted from in	come in lines 5 a	
If yo	our expenses differ	from month to m	onth, enter the av	verage expense.					
Not	e: Line numbers 1-4	4 are not used in	this form. These	numbers apply to	informa	ation required by a	similar form us	sed in chapter 7 o	cases.
5.	The number of p	eople used in d	letermining your	deductions from	n incon	ne			
		of any additional	dependents whor			deral income tax ret per may be different		4	
Nat	tional Standards	You mus	st use the IRS Na	tional Standards to	o answe	er the questions in I	ines 6-7.		
6.	Food, clothing, a Standards, fill in the		•			in line 5 and the IR	S National	\$	1,694.00
7.	the dollar amount people who are 6	for out-of-pocke 5 or olderbecau	t health care. The use older people h	number of people	e is spli allowai	ered in line 5 and the tinto two categories nee for health car care.	speople who	are under 65 and	d

Debtor 1 Debtor 2		Derrick C. DiMaggio Heidi L. DiMaggio				Case number (if kr	nown)			
Pec	ple w	who are under 65 years of age								
	-	Out-of-pocket health care allowance per person	\$	52						
	7b.	Number of people who are under 65	X	4	-					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$_	208.00	-	Copy here=>	\$	208.00		
Pec	ple w	who are 65 years of age or older								
	7d.	Out-of-pocket health care allowance per person	\$	114	_					
	7e.	Number of people who are 65 or older	Χ_	0						
	7f.	Subtotal. Multiply line 7d by line 7e.	\$_	0.00	_	Copy here=>	\$	0.00		
	7g.	Total. Add line 7c and line 7f			\$	208.00	Copy to	otal here=>	\$	208.00
1.00	al C4	enderde. Verrannet neethe IDC Least Chardende to				22.0.45				
		andards You must use the IRS Local Standards to n information from the IRS, the U.S. Trustee Prog					for housin	na for		
		tcy purposes into two parts:	,	ilus divided t		-ooai olanaara	ioi nousii	ig ioi		
		ing and utilities - Insurance and operating expens	ses							
		ing and utilities - Mortgage or rent expenses	_							
	arate Hou	rer the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance a	e ava enses	ilable at the l : Using the nu	oankrup Imber of	tcy clerk's offic	e.	,	pecified	759.00
9.		using and utilities - Mortgage or rent expenses:	and o	perating expe	11565.			_		
		Using the number of people you entered in line 5, fi listed for your county for mortgage or rent expenses		ne dollar amo	unt		\$ <u>1</u> ,	420.00		
	9b.	Total average monthly payment for all mortgages a	nd oth	ner debts sec	ured by y	our home.				
		To calculate the total average monthly payment, ad contractually due to each secured creditor in the 60	ld all a	amounts that	are					
		for bankruptcy. Next divide by 60.		·						
		Name of the creditor		Average mo payment	nthly					
		-NONE-		\$						
									5 .	41.1
		9b. Total average monthly paymen	it	\$	0.00	Copy here=>	S	0.00	on line	this amount 33a.
	9c.	Net mortgage or rent expense.								
		Subtract line 9b (total average monthly payment) from rent expense). If this number is less than \$0, enter			ge	\$	1,420.00	Copy here=>	\$	1,420.00
10.		ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fill					incorrect	and	\$	0.00
	Ex	plain why:								

Debtor 1 Debtor 2		ck C. DiMaggio L. DiMaggio				Case no	umber (i	if known)		
11.	Local tra	nsportation expenses	: Check the number of vehic	cles for whi	ch you claim a	an owr	nershi	p or operating	g expense.	
	□ 0. Go	to line 14.								
	□ 1. Go	to line 12.								
	■ 2 or m	ore. Go to line 12.								
12.			sing the IRS Local Standards perating Costs that apply for							460.00
13.	You may		pense: Using the IRS Local if you do not make any loan							
Ve	hicle 1	Describe Vehicle 1:	2010 Chevrolet Silvera	do 2500 1	137000 miles	S				
13a.	. Ownersh	ip or leasing costs using	g IRS Local Standard			\$		497.00		
13b.	. Average	monthly payment for all	debts secured by Vehicle 1.							
	Do not in	clude costs for leased v	vehicles.							
	are contr		y payment here and on line cured creditor in the 60 mont			t				
	Nan	ne of each creditor for	Vehicle 1	Average payment	monthly					
	Her	itage Fed. Fam. Cre	edit Union	\$	403.00					
		Total A	verage Monthly Payment	\$	403.00	Copy		\$403	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease line 13b from line 13a. i	e expense f this number is less than \$0	, enter \$0.			\$	94.00	Copy net Vehicle 1 expense here => \$	94.00
Ve	hicle 2	Describe Vehicle 2:	2012 Jeep Grand Chero	okee 8700	00 miles					
13d.	. Ownersh	•	g IRS Local Standard			\$	3	497.00		
13e.	. Average leased ve	, , ,	debts secured by Vehicle 2.	Do not inc	clude costs for					
	Nan	ne of each creditor for	Vehicle 2	Average payment	monthly					
	St I	Mary's Bank		\$	600.00					
		Total a	verage monthly payment	\$	600.00	Copy here =>		600.0	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease line 13e from line 13d. i	e expense f this number is less than \$0	, enter \$0.			\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.			: If you claimed 0 vehicles e allowance regardless of v						 n the \$	0.00
15.	also dedu	uct a public transportation	on expense: If you claimed to on expense, you may fill in w al Standard for <i>Public Trans</i>	hat you be						0.00

Debtor 1
Debtor 2
Defrick C. DiMaggio
Heidi L. DiMaggio
Case number (if known)

16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, seal-employment taxes, scool ascernly taxes, and identificate taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly parmount that is withheld to pay for taxes.  15. On not include real estate, sales, or use taxes.  16. It insurance: The total monthly payeroll deductions that your job requires, such as retirement contributions, union clues, and uniform costs.  16. It insurance: The total monthly parmounts that you pay for your own term file insurance, if two married people are filing together, include payments that you make for your spouse's tree file insurance.  17. Do not include payments that you make for your spouse's term file insurance.  18. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support. You will list shees obligations in line 35.  18. Education: The total monthly amount that you pay for education that is either required:  19. Court-ordered payments on past due obligations for spousal or child support. You will list these obligations in line 35.  19. Education: The total monthly amount that you pay for collucation that is either required:  19. a a condition for your job, or  19. for your physically or mentally challenged dependent child if no public education is available for similar services.  20. Education: The total monthly amount that you pay for childcare, such as babysiting, daycare, nursery, and preschool.  21. Childcare: The total monthly amount that you pay for childcare, such as babysiting, daycare, nursery, and preschool.  22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health amount?  19. The payments for health ins		er Necessary Expenses	In addition to the expense the following IRS categor		ns listed above	, you are allowed your monthly expenses	s for	
17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union duss, and uniform costs.  Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.  18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's term life insurance. If wo married people are filling together, include payments that you make for your spouse's term life insurance. If wo married people are filling together, include payments that you have for your spouse's term life insurance. If wo married people are filling together, include payments that you have for your spouse's term life insurance.  19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  20. Do not include payments on past due obligations for spousal or child support you will list these obligations in line 35.  21. Childcare: The total monthly amount that you pay for education that is either required:  as a condition for your job, or  for your physically or mentally challenged dependent child if no public education is available for similar services.  22. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  23. Do not include payments for any elementary or secondary school education.  24. Additional health care exposeses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and wedface of you or your dependents and that is not reimbursed by insurance or health savings accounts should be listed only in line 25.  25. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pages, call waiting, caller identification,	16.	self-employment taxes, soo your pay for these taxes. H and subtract that number for	cial security taxes, and Me cowever, if you expect to re com the total monthly amou	dicare taxe ceive a tax	es. You may ind x refund, you m	clude the monthly amount withheld from nust divide the expected refund by 12	\$	1,887.81
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.  8. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are fling together, include payments that you make for your spouses' stem life insurance.  Do not include premiums for life insurance on your dependents, for a non-filling spouse's life insurance, or for any form of life insurance other than term.  19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as a spousal or child support payments.  Do not include payments on past due obligations for spousal or child support you will list these obligations in line 35.  5. 26.27  20. Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services.  10. This dozer: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  11. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  12. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings accounts hould be listed only line 25.  13. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pages; call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, lif is not reimbursed by your employer.  12. Add all of the expenses allowed under the RS expense allowances liste	17.			eductions t	that your job re	quires, such as retirement		
thing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.  20. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousel or child support payments.  20. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.  21. Childcare: The total monthly amount that you pay for education that is either required:  as a condition for your job, or  for your physically or mentally challenged dependent child if no public education is available for similar services.  21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings accounts. Include only the amount that is more than the total enterted in line 7.  23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identifications, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  24. Add all of the expenses allowed by under the IRS expense allowances listed in lines 6-24.  25. Health insurance, disability insurance, and health savings accounts should be listed only in line 25.  Note: Do not include any expense expenses, such as topse reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  \$ 3,040.00  Total  These are additional deductions a				job, such	as voluntary 40	01(k) contributions or payroll savings.	\$	0.00
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Tor your physically or mentally challenged dependent child if no public education is available for similar services. \$ 0.00	20.	_	, , , ,	r educatio	n that is either	required:		
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that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.  23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call vaiding, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if if is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  24. Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Additional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expense allowances listed in lines 6-24.  Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.  Health insurance  Disability insurance  Po you actually spend this total amount?  No. How much do you actually spend?  Yes  26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C., § 252A(b)  27. Protection against family violence. The reaso	۷۱.					sitting, daycare, nursery, and prescribor.	\$	715.00
23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.  4\$ 0.00  24. Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.  Additional Expense Deductions  These are additional deductions allowed by the Means Test.  Note: Do not include any expenses allowances listed in lines 6-24.  25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.  Health insurance  \$ 736.65  Disability insurance  \$ 167.44  Health savings account  \$ 904.09  Copy total heres  \$ 904.09  Copy total heres  \$ 904.09  Copy total heres  \$ 0.00  Total  \$ 904.09  Copy total heres  \$ 0.00  Protection against family violence. The reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § \$29A(b)  27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.	22.	that is required for the heal	th and welfare of you or yo	our depend	lents and that is	s not reimbursed by insurance or paid		
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safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.	Add	Add lines 6 through 23.  itional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do you	These are additiona Note: Do not include ity insurance, and health nce, and health savings actions are not included ity insurance.	deduction any expersion and ex	ns allowed by the nse allowances account experiment are reasonabed 167.44 0.00	s listed in lines 6-24.  nses. The monthly expenses for health bly necessary for yourself, your spouse, o	or	
0.00	<b>Add</b> 25.	Add lines 6 through 23.  itional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do your yes  Continued contributions continue to pay for the reasyour household or member	These are additiona Note: Do not include ity insurance, and health nce, and health savings activated amount?  To to the care of household conable and necessary car of your immediate family with the care of your immediate family with the care and necessary car of your immediate family with the care of your immediate family with the your im	savings a secounts that \$ \$ \$ \$ \$ \$ \$ \$ \$ for family re and sup who is una	rs allowed by the right and allowed by the right are reasonable and ar	copy total here=>  e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or\$	904.09
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	Derrick C. DiMaggio Heidi L. DiMaggio	Case number (if known)		
	Additional home energy costs. Your hom ine 8.	e energy costs are included in your insurance and operating expenses on		
1	If you believe that you have home energy c B, then fill in the excess amount of home en	osts that are more than the home energy costs included in expenses on linergy costs	е	
	You must give your case trustee documents amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the additional ry.	\$_	0.00
;		ren who are younger than 18. The monthly expenses (not more than pendent children who are younger than 18 years old to attend a private or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain why the amount ot already accounted for in lines 6-23.		
,	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the date of adjustment.	\$	0.00
		ne monthly amount by which your actual food and clothing expenses are allowances in the IRS National Standards. That amount cannot be more is in the IRS National Standards.		
		onal allowance, go online using the link specified in the separate obe available at the bankruptcy clerk's office.		
,	You must show that the additional amount of	claimed is reasonable and necessary.	\$	0.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga	amount that you will continue to contribute in the form of cash or financial nization. 11 U.S.C. § 548(d)(3) and (4).		
1	Do not include any amount more than 15%	of your gross monthly income.	\$	0.00
	Add all of the additional expense deduct	ions.	\$	904.09
	, and the second			
33. <b>F</b>	pans, and other secured debt, fill in lines	_		
33. <b>F</b>	or debts that are secured by an interest bans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually due to each secured		je monthly
33. <b>F</b> c <b>Ic</b> CI	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	payme	nt
33. <b>F</b>	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here	33a through 33e. ent, add all amounts that are contractually due to each secured		
33. Fi	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	payme	0.00
33. F. Id. T. cr. 33a.	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractually due to each secured hkruptcy. Then divide by 60.	payme	0.00 403.00
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33. Fice Transfer of the state	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractually due to each secured hkruptcy. Then divide by 60.  =>  Identify property that secures the debt  Does payment include taxes	payme	0.00 403.00
33. Fice Transfer of the state	or debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured or nkruptcy. Then divide by 60.	payme	0.00 403.00
33. Fice Trust of the state of	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured haruptcy. Then divide by 60.	payme \$ \$	0.00 403.00 600.00
33. Ficological States of	or debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured or nkruptcy. Then divide by 60.	payme	0.00 403.00
33. Fice Trust of the state of	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured hkruptcy. Then divide by 60.    Snowmobile   Snowmobile   Snowmobile   Snowmobile   No	\$\$	0.00 403.00 600.00
33. Fice Trust of the state of	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured haruptcy. Then divide by 60.    Snowmobile   Snowm	payme \$ \$	0.00 403.00 600.00
33. Fice Trust of the state of	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured hkruptcy. Then divide by 60.    Snowmobile   Snowmobile   Snowmobile   Snowmobile   No	\$\$	0.00 403.00 600.00
33. Fice Transfer of the state	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured haruptcy. Then divide by 60.    Snowmobile   No	\$\$	0.00 403.00 600.00
33. Fice Transfer of the state	or debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured ankruptcy. Then divide by 60.    Showmobile   Does payment include taxes or insurance?	\$\$ \$\$	0.00 403.00 600.00

	Derrick C. DiMaggio Heidi L. DiMaggio			Case	e number ( <i>if k</i>	nown)			
	any debts that you listed in li ther property necessary for y				,				
	No. Go to line 35.		-						
	Yes. State any amount that yo	ossession of your property							
Name o	of the creditor	Identify property that so	ecures the deb	t	Total cure	amount		onthly	
-NONE	E-			\$		-	ar - 60 = \$	nount	
		-					Come		
				Total	\$	0.00	Copy total here=>	\$_	0.00
	you owe any priority claims - past due as of the filing date				at				
	No. Go to line 36.								
	Yes. Fill in the total amount of ongoing priority claims, si	all of these priority claims. uch as those you listed in		de current or					
	0 0,	due priority claims			\$	0.00	÷ 60	\$	0.00
36. <b>Proj</b>	ected monthly Chapter 13 pla				\$				
Offic the E To fir	rent multiplier for your district as be of the United States Courts (the Executive Office for United State and a list of district multipliers that incourage instructions for this form. This li	for districts in Alabama and es Trustees (for all other d ludes your district, go online u	d North Carol istricts). Ising the link sp	ina) or by ecified in the	x				
Aver	rage monthly administrative exp	ense			\$		Copy total		
	d all of the deductions for de d lines 33e through 36.	bt payment.						\$	1,049.00
Total De	eductions from Income								
38. <b>Add</b>	all of the allowed deductions	<b>5.</b>							
	py line 24, <i>All of the expenses a</i> pense allowances	allowed under IRS	\$	8,231.56	_				
Cop	py line 32, All of the additional e			904.09	_				
Cop	py line 37, All of the deductions	for debt payment	+\$	1,049.00					
Tat	tal deductions		\$	10,184.65	Convi	otal here=>	9	6	10,184.65

otor 2		rick C. DiM di L. DiMag	00			Ca	ase n	umbe	er (if known)			
2:	De	termine You	ır Disposable Income Under 1	1 U.S.C. § 13	<b>25</b> (b	p)(2)						
			rent monthly income from line Current Monthly Income and C				ł.			\$		11,041.92
ch dis red	ildren sability ceived	The month payments for in accordan	ly necessary income you rece ly average of any child support p or a dependent child, reported in ce with applicable nonbankrupto ended for such child.	payments, fos Part I of Forn	ter o	care payments, or 2C-1, that you		\$	C	0.00		
en in	nploye 11 U.S	r withheld fro S.C. § 541(b)	etirement deductions. The more mages as contributions for quality (7) plus all required repayments . § 362(b)(19).	ıalified retirem	nent	plans, as specifie	d	\$_	658	3.79		
2. <b>T</b> o	tal of	all deductio	ns allowed under 11 U.S.C. §	707(b)(2)(A).	Сор	y line 38 here:	=>	\$	10,184	.65		
ex the	pense eir exp	s and you ha enses. You i	ial circumstances. If special circumstances. If special circumster on reasonable alternative, dominist give your case trustee a desocumentation for the expenses.	escribe the sp	ecia	al circumstances a	nd					
escr	ibe th	e special ci	rcumstances			Amount of exp	ens	se				
						\$						
						\$						
						\$						
					•	0.00		Cop here	y => \$		0.00	
				Total	Φ-	0.00			-			
l. To	tal ad	ljustments. /	Add lines 40 through 43.	Total	Ľ		\$_		10,843.44	Co <sub>l</sub>	oy e=> <b>-</b> \$	10,843.4
		-	Add lines 40 through 43thly disposable income under			=>	\$_	e 39		1 '	•	10,843.44
5. <b>C</b> a	alculat	te your mon				=>	\$_	÷ 39		1 '	e=> <b>-</b> \$	10,843.44 198.48
3: 6. <b>Ch</b> ha tim yo	Ch nange ve cha ne you u filed	te your mon  tange in Inco in income canged or are r case will be your petition	thly disposable income under	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you rep your bankruptcy p if the wages repor the second colum	line sported ted n, e	ed ir	n this form and during the eased after	1 '	e=> <b>-</b> \$	
3: 6. Ch ha tim yo wa	Ch nange ve cha ne you u filed	te your mon  tange in Inco in income canged or are r case will be your petition	thly disposable income under ome or Expenses  or expenses. If the income in Formation below, check 122C-1 in the first column.	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you rep your bankruptcy p if the wages repor the second colum	line	ed ir ion a incr xpla	n this form and during the eased after	her	e=> <b>-</b> \$	198.48
3: 3: 6. Ch ha tim yo wa	Ch nange ve chane you u filed ages in	te your mon nange in Income of anged or are r case will be your petition acreased, fill	thly disposable income under ome or Expenses or expenses. If the income in Formation control of the copen, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you repyour bankruptcy pif the wages reporthe second columunt of the increase	line	ed ir ion a incr xpla	n this form and during the eased after in why the Increase or decrease?	her	e=> -\$ \$	198.48
3: 3: 6. CP ha tim yo wa	Ch nange ve chane you u filed ages in	te your mon nange in Income of anged or are r case will be your petition acreased, fill	thly disposable income under ome or Expenses or expenses. If the income in Formation control of the copen, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you repyour bankruptcy pif the wages reporthe second columunt of the increase	line	ed ir ion a incr xpla	n this form and during the eased after in why the Increase or decrease?	her	e=> -\$ \$	198.48
3: 3: 3: 6. Ch ha tim yo wa	Change ve change you u filed ages in	te your mon nange in Income of anged or are r case will be your petition acreased, fill	thly disposable income under ome or Expenses or expenses. If the income in Formation control of the copen, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you repyour bankruptcy pif the wages reporthe second columunt of the increase	line	ed irion a	In this form and during the eased after in why the continuous or decrease?  Increase Decrease Increase Decrease	her	e=> -\$ \$	198.48
3: 65. CP ha tim yo wa borm 1 122 1 122 1 122 1 122	Change ve change you u filed ages in	te your mon nange in Income of anged or are r case will be your petition acreased, fill	thly disposable income under ome or Expenses or expenses. If the income in Formation control of the copen, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you repyour bankruptcy pif the wages reporthe second columunt of the increase	line	ed ir ion a incr xpla	In this form and during the eased after in why the Increase or decrease?  Increase Decrease Increase Decrease Increase	Air \$	e=> -\$ \$	198.48
5. <b>Ca</b> 13: 6. <b>Ch</b> ha tim yo	Change ve change you filed ages in	te your mon nange in Income of anged or are r case will be your petition acreased, fill	thly disposable income under ome or Expenses or expenses. If the income in Formation control of the copen, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	§ 1325(b)(2).  orm 122C-1 or the date you fow. For example, enter line:	the filed ple, 2 in	expenses you repyour bankruptcy pif the wages reporthe second columunt of the increase	line	ed ir ion a incr xpla	In this form and during the eased after in why the continuous or decrease?  Increase Decrease Increase Decrease	Arr \$	e=> -\$ \$	198.48

# 

ebtor 1 ebtor 2	Heidi L. DiMaggio	Case number (if known)
art 4:	Sign Below	
	By signing here, under penalty of perjury you de	eclare that the information on this statement and in any attachments is true and correct.  X /s/ Heidi L. DiMaggio
^	Derrick C. DiMaggio Signature of Debtor 1	Heidi L. DiMaggio Signature of Debtor 2
Date	November 29, 2018 MM / DD / YYYY	Date November 29, 2018 MM / DD / YYYY

Derrick C. DiMaggio

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Debtor 1	Derrick C. DiMaggio		
Debtor 2	Heidi L. DiMaggio	Case number (if known)	

# **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period **05/01/2018** to **10/31/2018**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Springfield Auto Mart Inc.

Constant income of \$8,204.52 per month.\*

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Debtor 1	Derrick C. DiMaggio		
Debtor 2	Heidi L. DiMaggio	Case number (if known)	

# **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period 05/01/2018 to 10/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions Source of Income: Employer: Newport Chevrolet Buick GMC I Constant income of \$2,837.40 per month.\*

Debtor 1 Derrick C. DiMaggio Heidi L. DiMaggio

Case number (if known)

### \*Paycheck Details:

### **Springfield Auto Mart Inc.**

Date	Earnings	Overtime	Taxes	Other	Net Check
2018-05-04	2,304.51	0.00	316.89	160.57	1,827.05
2018-05-11	1,405.00	0.00	249.57	124.59	1,030.84
2018-05-18	1,097.50	0.00	180.14	112.29	805.07
2018-05-25	1,737.50	0.00	330.05	137.89	1,269.56
2018-06-01	1,282.50	0.00	221.90	119.69	940.91
2018-06-08	1,828.66	0.00	303.25	321.53	1,203.88
2018-06-15	1,835.00	0.00	355.10	141.79	1,338.11
2018-06-22	2,132.00	0.00	450.21	153.67	1,528.12
2018-06-29	1,892.50	0.00	369.87	184.09	1,338.54
2018-07-06	2,522.04	0.00	362.08	209.27	1,950.69
2018-07-13	1,235.00	0.00	211.19	157.79	866.02
2018-07-20	1,942.50	0.00	383.31	186.09	1,373.10
2018-07-27	2,072.50	0.00	429.21	191.29	1,452.00
2018-08-03	1,772.50	0.00	339.03	179.29	1,254.18
2018-08-10	1,950.96	0.00	269.70	186.42	1,494.84
2018-08-17	2,120.00	0.00	445.97	193.19	1,480.84
2018-08-24	2,087.50	0.00	434.49	191.89	1,461.12
2018-08-31	1,971.25	0.00	393.47	187.24	1,390.54
2018-09-07	3,198.65	0.00	533.26	236.33	2,429.06
2018-09-14	1,582.50	0.00	290.20	171.69	1,120.61
2018-09-21	2,207.50	0.00	476.85	196.69	1,533.96
2018-09-28	1,616.25	0.00	298.88	173.04	1,144.33
2018-10-05	2,692.80	0.00	463.53	216.10	2,013.17
2018-10-12	1,667.50	0.00	312.04	175.09	1,180.37
2018-10-19	1,512.50	0.00	273.85	168.89	1,069.76
2018-10-26	1,560.00	0.00	284.57	170.79	1,104.64
Totals:	49,227.12	0.00	8,978.61	4,647.20	35,601.31

### **Newport Chevrolet Buick GMC Inc**

Date	Earnings	Overtime	Taxes	Other	Net Check
2018-05-18	547.20	0.00	61.23	248.08	237.89
2018-05-25	720.00	8.10	95.91	255.32	376.87
2018-06-01	720.00	86.40	110.93	258.45	437.02
2018-06-08	649.80	0.00	85.34	196.52	367.94
2018-06-15	720.00	35.10	105.55	200.73	448.82
2018-06-22	720.00	56.70	109.68	201.59	465.43
2018-06-29	720.00	48.60	108.12	201.27	459.21
2018-07-06	684.00	0.00	91.90	197.89	394.21
2018-07-13	522.00	144.00	88.46	197.17	380.37
2018-07-20	720.00	27.00	103.98	200.41	442.61
2018-07-27	718.20	0.00	98.46	199.25	420.49
2018-08-03	720.00	129.60	123.65	204.51	521.44
2018-08-10	720.00	43.20	107.08	201.05	455.07
2018-08-17	720.00	75.60	113.30	202.35	479.95
2018-08-24	691.20	0.00	93.30	198.17	399.73
2018-08-31	720.00	27.00	103.97	200.41	442.62
2018-09-07	711.00	0.00	97.08	198.97	414.95
2018-09-21	720.00	48.60	108.12	201.27	459.21
2018-09-28	720.00	143.10	126.24	205.05	531.81
2018-10-05	720.00	86.40	115.37	202.78	488.25
2018-10-12	720.00	40.50	106.57	200.95	452.98
2018-10-19	720.00	78.30	113.81	202.46	482.03
2018-10-26	622.80	0.00	80.18	195.44	347.18
Totals:	15,946.20	1,078.20	2,348.23	4,770.09	9,906.08

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

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Debtor 1
Debtor 2
Defrick C. DiMaggio
Heidi L. DiMaggio
Case number (if known)

# Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 53 of 63

Fill	in this information to identify your case:		
Del	otor 1 Derrick C. DiMaggio		
Del	First Name Middle Name Last Name  otor 2 <b>Heidi L. DiMaggio</b>		
(Spc	buse if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF NEW HAMPSHIRE		
	se number	_	if this is an ed filing
Эf	ficial Form 106Sum		
Su	mmary of Your Assets and Liabilities and Certain Statistical Information	1	2/15
nfo	as complete and accurate as possible. If two married people are filing together, both are equally responsible f rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing ameno r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your as Value of	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	67,559.69
	1c. Copy line 63, Total of all property on Schedule A/B	\$	67,559.69
Par	t 2: Summarize Your Liabilities		
		Your lia	bilities
		Amount	you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	56,123.81
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,261.32
	Your total liabilities	\$	92,385.13
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,799.93
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,427.60
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	amily, or

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

# Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 54 of 63

Debtor 2	Heidi L. DiMaggio	Case number (if known)		
° Fran	a the Statement of Vour Current Monthly Income Con	avvour total current monthly income from Official	LEorm	

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 11,041.92

### 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Derrick C. DiMaggio

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this in	formation to identify your	case:		
Debtor 1	Derrick C. DiMag	aio		
200101	First Name	Middle Name	Last Name	
Debtor 2	Heidi L. DiMaggio	)		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	DISTRICT OF NEW HA	MPSHIRE	
Case number	r			
(if known)				☐ Check if this is an
				amended filing
If two married You must file obtaining mo	d people are filing together	r, both are equally responder, both are equally responder.		
9	Sign Below			
Did you	pay or agree to pay some	one who is NOT an atto	ney to help you fill out bankruptc	y forms?
■ No				
☐ Yes	s. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	enalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed with this	s declaration and
X /s/ D	Derrick C. DiMaggio		X /s/ Heidi L. DiMagg	io
Deri	rick C. DiMaggio		Heidi L. DiMaggio	
Sign	ature of Debtor 1		Signature of Debtor 2	
Date	November 29, 2018		Date November 29	9, 2018

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B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court District of New Hampshire**

In	Derrick C. DiMaggio re Heidi L. DiMaggio		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	d to me, for services i	
				2,500.00	
	Prior to the filing of this statement I have received	[	\$	690.00	
	Balance Due		\$	1,810.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com		•		
	☐ I have agreed to share the above-disclosed compensory of the agreement, together with a list of the national statement.				law firm. A
5.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspect	ts of the bankruptcy	case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, sta</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> </ul>	atement of affairs and plan which tors and confirmation hearing, an	n may be required; and any adjourned he	arings thereof;	
	Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ons as needed; preparation	and filing of mo	tions pursuant to	11 USC
5.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			ces, relief from sta	y actions or
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of an s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for	representation of the	debtor(s) in
	November 29, 2018	/s/ Alice C. Ranso	on		
	Date	Alice C. Ranson Signature of Attorne	21/		
		Elliott, Jasper, A	uten & Shklar, LL	Р	
		35 Main Street, S Newport, NH 037			
		(603) 863-4105 F	ax: (603) 863-630	)1	
		aranson@elliottja  Name of law firm	asper.com		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	45	filing fee	
\$7	75	administrative fee	
+ \$1	15	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case: 18-11582-BAH Doc #: 1 Filed: 11/29/18 Desc: Main Document Page 61 of 63

# **United States Bankruptcy Court**District of New Hampshire

Heidi L. DiMaggio	Debtor(s)	Chapter	13
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consisting of \_\_\_\_ pages is complete, correct and consistent with the debtor's schedules pursuant to LBRs and assumes all

Date:	November 29, 2018	/s/ Derrick C. DiMaggio	
		Debtor Signature	
		Derrick C. DiMaggio	
		Print Name	
		Address 6 Union Street	
		Newport NH 03773-0000	
		Tel. No.	
Date:	November 29, 2018	/s/ Heidi L. DiMaggio	
		Debtor Signature	
		Heidi L. DiMaggio	
		Print Name	
		Address 6 Union Street	
		Newport NH 03773-0000	
		Tel. No.	

responsibility for errors and omissions.

Bank of America P.O. Box 15019 Wilmington, DE 19886-5019

Capital One Bank USA N.A. P.O. Box 71087 Charlotte, NC 28272-1087

Capital One Bank USA N.A. P.O. Box 71083 Charlotte, NC 28272-1082

Capital One Bank USA N.A. P.O. Box 71083 Charlotte, NC 28272-1082

Capital One Bank USA N.A. P.O. Box 71083 Charlotte, NC 28272-1082

Chase/Cardmember Service P.O. Box 1423 Charlotte, NC 28021

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Dartmouth Hitchcock P.O. Box 419114 Boston, MA 02241-9114

First Premier Bank P.O. Box 5519 Sioux Falls, SD 57117

Freedom Road Financial P.O. Box 4597 Hinsdale, IL 60522

Gragil Associates 29 Winter Street P.O. Box 1010 Pembroke, MA 02359

Heritage Fed. Fam. Credit Union 30 Allen Street Rutland, VT 05701

One Main Financial 450 West Street Keene, NH 03431 Snap-On Credit
950 Technology Way #301
Libertyville, IL 60048

Southwest Credit PO Box 650543 Dallas, TX 75265-0543

St Mary's Bank P.O. Box 720 Manchester, NH 03105

Synchrony Bank P.O. Box 960061 Orlando, FL 32896

Synchrony Bank P.O. Box 960061 Orlando, FL 32896

Synchrony Bank/Care Credit 140 Wekira Springs Road Longwood, FL 32779